

Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 12/30/08

Address: 7900 N 620E

Case #: 22-43932

FREMONT, IN 46737

County: Stevenson

Type of Laboratory Seizure (check one)

- ☐ Operational Lab
☐ Chemical/Glassware/Equipment (only)
☐ Dumpsite (only)

Seizure Location (check all that apply)

- ☐ Residence
☐ Outbuilding
☒ Vehicle
☐ Hotel/Motel
☐ Open - No Structure
☐ Other:

Items Found: Location (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ Lithium/Ammonia Reaction(s): Vehicle
☐ Red Phosphorous/Iodine Reaction(s): _____
☒ Flammable Solvents: Vehicle
☒ Water Reactive Metal (Lithium): Vehicle
☐ Anhydrous Ammonia: _____
☒ Hydrochloric Acid Gas Generator(s): Vehicle
☒ Corrosive Acid: Vehicle
☒ Corrosive Base: Vehicle
☐ Other (item and location): _____

Child under age 18 discovered (check one)

- ☐ Yes 2 (number present)
☒ No

*If yes, fax report to Child Protective Services

Investigative Information

- ☐ Ephedrine/Pseudoephedrine Tracking Log
☐ Retail/Merchant Tip
☐ Other: _____

This report is to be faxed to the following agencies that serve the location:

Fire Department: FREMONT

Fax: 260-495-0097

Health Department: STEVENS CO

Fax: 260-665-1418

Child Protection Service: _____

Fax: _____

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: COLLINS

Phone 260-433-8661

** This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

*** This form is to be included with the case file, and a copy sent to the clandestine Laboratory Team Leader for retention.

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